



STATE OF WASHINGTON

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AFFIDAVIT

COUNTY OF

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I (we), _____ on

behalf of

NAME MUST BE SAME ON BOND AND APPLICATION

attest that the maximum monthly purchases of unprocessed agriculture products

will not exceed \$ _____

I (we) do further understand that, as a Limited Dealer, I (we) will be required to make payment for purchases at the time of taking possession of the product.

Payment may be made with cash or by check. Any violation of this requirement may be considered good and sufficient cause for the revocation or suspension of my (our) license to operate as a dealer under the Washington Commission Merchants Act, Chapter 20.01 RCW.

PRINT NAME

SIGNATURE

DATE _____